FEDERAL COMMUNICATIONS COMMISSION Washington, DC 20554

Approved by OMB 3060-0076
Est. time per response: 1 hour

COMMON CARRIER ANNUAL EMPLOYMENT REPORT

[Please read instructions before completing and for Notice regarding public burden.]

SECTION 1 - General Information	ation															
1. Name and Mailing Address of Respondent Del Cambre Telephone Co.	of Resp	t ondent	e Co,											Che is a	Check here if this is a change of	
Ocheambre	5	1052	8											address.	ess.	
2. Year Report Filed 2019			3. Reporting Period Co	Period (Endi	3. Reporting Period (Ending Date of Pay Period Covered by Report) AUT (M 3 15 701 0	010		4. Number de Reporting a. Fe b. 16	 Number of Full-Time Employees during Selected Reporting Period (check one): A Fewer than 16 (complete Sections I, IV, and V only) 16 or more (complete all sections) 	nployees duri (one): complete Section plete all sections	ng Selected ions I, IV, and ons)	I V only)	I		*	
SECTION II - Full-Time Employees.	oyees.					-										
								Num (Report emple	Number of Employees (Report employees in only one category)	yees one category)						
5									Race/Ethnicity							
Categories		Hispanic or	nic or						Not-Hispanic or Latino	ic or Latino						Total
		Latino	по			Male	ale					Female	nale			Columns A - N
		Male	Female	White	Black or African American	Native Hawaiian or Other Pacific	Asian	American Indian or Alaska Native	Two or more races	White	Black or African American	Native Hawaiian or Other Pacific	Asian	American Indian or Alaska Native	Two or more races	
		>	æ	0	D	Е	П	G	I	-	ل	7	٦	М	z	0
Executive/Senior Level Officials and Managers	7															0
First/Mid-Level Officials and Managers	1.2															0
Professionals	N															0
Technicians	ω															0
Sales Workers	4															0
Administrative Support Workers	ທ															0
Craft Workers	თ										8					0
Operatives	7															0
Laborers and Helpers	œ			e												0
Service Workers	9															0
TOTAL	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
PREVIOUS YEAR TOTAL	==							I								0 FCC 395
																1000

							Nun (Report emp	Number of Employees (Report employees in only one category)	oyees one category					
Job								Race/Ethnicity	Ÿ					ŀ
Categories	I	Hispanic or						Not-Hispar	Not-Hispanic or Latino					
		Latino			×	Male					Fer	Female		
	Male	Female	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races
	>	В	0	D	п	п	G	I	-	د	7	Г	3	z
Executive/Senior Level Officials and Managers 1.1														
First/Mid-Level Officials and 1.2	10													
Professionals 2	10													
Technicians 3														
Sales Workers 4	-													
Administrative Support 5	0.													
Craft Workers 6														
Operatives 7														
Laborers and Helpers 8														
Service Workers 9														
TOTAL 10	0	0	0	0	0	0	0	0	0	0	0	0	0	0
PREVIOUS YEAR TOTAL 11														
SECTION IV - Report of Discrimination Complaints Pursuant to 47 CFR 22.321, 23.55, 90.168, 101.4, and 101.311.	nation Cor	nplaints Pursu	ant to 47 CFR	22.321, 23.5	55, 90.168, 10	1.4, and 101.:	311.							
This is to advise the Commission that no complaints regarding violations of the equal employment provisions of Federal, state, territorial, or local statutes have been filed against this company before any body having competent jurisdiction in such matters during the calendar year covered by this report. This is to advise the Commission that the following complaints alleging violations of the provisions of any equal employment opportunity statute have been filed against this company. (Attach a list indicating parties involved, date filed, courts or agencies before which the matter has been heard, file number or other designation, and current status or disposition.	commission ody having commission ommission parties inv	that no compla g competent juri that the followi volved, date file	ints regarding sdiction in such ng complaints :	violations of the matters during alleging viola	the equal emp ing the calend itions of the pro which the ma	loyment provi ar year cover ovisions of an itter has been	sions of Fede ed by this rep y equal emplo heard, file nu	ral, state, terri ort. yyment opport	itorial, or local unity statute I	statutes hav	local statutes have been filed against this ute have been filed against this company tion, and current status or disposition.	gainst this company.		
SECTION V - Certification I certify that to the best of my knowledge, information, and belief, all statements in this report are true and correct.	ledge, infor	rmation, and be	lief, all stateme	nts in this re	port are true ai	nd correct.								
Date 123/19 N	ed or Printe	Typed or Printed Name of Person Signing	son Signing			Signature	C	2	>			Telephone No.	025	73
Title of Person Signing				WILLFULLY OF ANY ST,	WILLFULLY FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (18 U.S.C. 1001) AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (47 U.S.C. 312 (A)(1) AND/OR FORFEITURE (47 U.S.C. 503).	EMENTS MA	DE ON THIS	FORM ARE P	UNISHABLE S.C. 312 (A)	BY FINE AN	D/OR IMPRIS	ONMENT (18 (47 U.S.C. 50	U.S.C. 1001)	AND/C